Case:17-10157-SDB Doc#:26 Filed:12/26/18 Entered:12/26/18 12:01:58 Page:1 of 4 Fill in this information to identify your case: Debtor 1 Regina Nelson Ruffin Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number 17-10157 (if known) Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  $\square$  No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 Blue Cross Blue Shield Last 4 digits of account number \$697.32 Nonpriority Creditor's Name When was the debt incurred? PO Box 6406 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Domestic support obligations** 6a. 0.00

Official Form 106 E/F

Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 697.32
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 697.32

Fill in this information to identify your case:				
Debtor 1	Regina Nelson Ruffin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT OF GEORGIA		
_	17-10157			
(if known)				

Check if this is an amended filing

### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
D	id you pay or agree to pay someone who is NOT an attorney t	help you fill out bankruptcy forms?	
	l No		
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)	
	der penalty of perjury, I declare that I have read the summary at they are true and correct.  /s/ Regina Nelson Ruffin Regina Nelson Ruffin	and schedules filed with this declaration and  X  Signature of Debtor 2	

Official Form 106Dec

#### Case:17-10157-SDB Doc#:26 Filed:12/26/18 Entered:12/26/18 12:01:58 Page:4 of 4

## UNITED STATES BANKRUPTCY COURT Southern District of Georgia Augusta Division

In re:			Case: 17-10157-SDB
	Regina Nelson Ruffin,	Debtor.	Chapter: 13
		Devior.	Judge Susan D. Barrett

#### **CERTIFICATE OF SERVICE**

I hereby certify that copies of the foregoing were served on December 26, 2018, by CM/ECF electronic notice, on the following:

Huon Le Office of the Chapter 13 Trustee notices@chp13aug.org

and that copies of the foregoing along with *Notice of Chapter 13 Bankruptcy Case* and *Chapter 13 Plan and Motion* were served on December 26, 2018 by placing copies of the same for collection and mailing on December 26, 2018, first-class postage prepaid, on the following:

Blue Cross Blue Shield Attn: Officer/Agent PO Box 6406 Carol Stream, IL 60197

Respectfully submitted on December 26, 2018.

/s/ Matthew James Duncan
Matthew James Duncan (GA Bar #: 143397)
2602 Commons Blvd., Ste. A, Augusta, GA 30909
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office@matthewjamesduncan.com